Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identi	fy Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full n	ame		
	Write the na	ame that is on	Kellie	
	picture ider	ur government-issued cture identification (for ample, your driver's	First name	First name
	license or	passport).	Middle name	Middle name
	Bring your picture		Smith	
	identification meeting with	on to your th the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		ames you have e last 8 years		
	Include you maiden nar	ur married or mes.		
3.	your Socia number or Individual	federal	xxx-xx-1168	

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
business names and loyer Identification bers (EIN) you have in the last 8 years de trade names and a business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
	EINs	EINs
re you live	26151 Lakeshore Blvd. Apt. 909	If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code Cuyahoga	Number, Street, City, State & ZIP Code
	County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
you are choosing district to file for ruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)
	oyer Identification pers (EIN) you have in the last 8 years de trade names and a business as names de you live	Dusiness names and oper Identification pers (EIN) you have in the last 8 years Business name(s) Business name(s) EINs Business name(s) EINs Elyou live 26151 Lakeshore Blvd. Apt. 909 Euclid, OH 44132 Number, Street, City, State & ZIP Code Cuyahoga County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.

Deb	otor 1	Kellie Smith					Case n	umber (if known)	
Par	t 2:	Fell the Court About \	our Bankı	ruptcy Ca	se				
7.	The c	hapter of the ruptcy Code you are	Check on	e. (For a b	rief description of each, see N go to the top of page 1 and ch			C. § 342(b) for Individu	uals Filing for Bankruptcy
	choo	sing to file under	■ Chapte	er 7					
			☐ Chapte						
			☐ Chapte						
			☐ Chapte						
			— Опара	01 10					
8.	How	you will pay the fee	abo orde a pr ■ I ne	out how your er. If your re-printed red to pay	the entire fee when I file my petition. Please check with the clerk's office in your local court for more details by you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money our attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with ted address. pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay				
			☐ I red but app	quest that is not requilies to you	e in Installments (Official Form t my fee be waived (You may uired to, waive your fee, and m ur family size and you are unat in to Have the Chapter 7 Filing	request nay do so ole to pay	only if your incor the fee in installr	ne is less than 150% one is less than 150% onents). If you choose the second se	of the official poverty line that this option, you must fill out
9. Have you filed for bankruptcy within the last 8 years?									
	iusi o	yours.	— 163.		Cleveland, OH (Chp. 7-				
				District	Discharged)	When	3/02/08	Case number	08-11412
				District		When		Case number	
				District		When		Case number	
10.		ny bankruptcy	■ No						
		s pending or being by a spouse who is	☐ Yes.						
	you,	ling this case with or by a business er, or by an te?							
				Debtor				Relationship to y	/ou
				District		When		Case number, if	known
				Debtor				Relationship to y	/ou
				District		When		Case number, if	known
11.		ou rent your	□ No.	Go to li	ne 12.				
		ence?	Yes.	Has yo	ur landlord obtained an evictio	n judgm	ent against you?		
			103.		No. Go to line 12.	-	-		
				_	Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	About ar	n Eviction Judgme	nt Against You (Form	101A) and file it with this

	or 1 Kellie Smith			Case number (if known)
arí	3: Report About Any Bu	ısinesses	You Own as a Sole Proprie	etor
	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	300
	business.	☐ Yes.	Name and location of bu	usiness
	A sole proprietorship is a business you operate as		Name of business, if any	
	an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code
	it to this petition.		Check the appropriate b	ox to describe your business:
	·		☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	ter (as defined in 11 U.S.C. § 101(6))
			■ None of the above	ve
 Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? 		deadline operation	s. If you indicate that you are ns, cash-flow statement, and S.C. 1116(1)(B).	e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedur
	For a definition of small	■ No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code
rí	4: Report if You Own or	Have Any	/ Hazardous Property or A	ny Property That Needs Immediate Attention
	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat	☐ Yes.		
	of imminent and identifiable hazard to	□ 163.	What is the hazard?	
	public health or safety?			
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
For example, do you own perishable goods, or livestock that must be fed, or a building that needs				
	perishable goods, or livestock that must be fed,		Where is the property?	Number, Street, City, State & Zip Code

Debtor 1 Kellie Smith

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Kellie Smith			Case number (if ki	nown)		
art	6: Answer These Questi	ons for Repo	rting Purposes				
16.	What kind of debts do you have?		a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			No. Go to line 16b.				
			Yes. Go to line 17.				
				ss debts? Business debts are debts that on through the operation of the business			
			No. Go to line 16c.				
			Yes. Go to line 17.				
		16c. Sta	ate the type of debts you owe th	at are not consumer debts or business de	ots		
17.	Are you filing under Chapter 7?	□ No. I ar	m not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses		e paid that funds will be available	g under Chapter 7. Do you estimate that after any exempt property is excluded and administrative that funds will be available to distribute to unsecured creditors?			
	are paid that funds will be available for distribution to unsecured creditors?		Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	\$0 - \$50,0 \$50,001 - \$100,001 \$500,001	\$100,000 - \$500,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	\$0 - \$50,00 \$50,001 - \$100,001 \$500,001	\$100,000 - \$500,000	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
art	7: Sign Below						
or	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
docum			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relie	equest relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
			ase can result in fines up to \$25	ealing property, or obtaining money or pro 0,000, or imprisonment for up to 20 years			
		Kellie Smit Signature of I	h	Signature of Debtor 2			
		Executed on	February 25, 2019	Executed on MM / DD)/YYYY		

Debtor 1	Kellie Smith	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Anna Marie Wall	Date	February 25, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Anna Marie Wall 0095884		
Printed name		
Rauser & Associates		
Firm name		
614 W. Superior # 950		
Cleveland, OH 44113		
Number, Street, City, State & ZIP Code		
Contact phone 216-263-6200	Email address	www.ohiolegalclinic.com
0095884 OH		
Bar number & State		

		mation to identify your	case:			
Debt	or 1	Kellie Smith First Name	Middle Name	Last Name		
Debt (Spou	or 2 se if, filing)	First Name	Middle Name	Last Name		
		inkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
(if kno	e number wn)				☐ Check	c if this is an
					amen	ded filing
~ "		4000				
		<u>rm 106Sum</u>	and Lighilities s	nd Certain Statistical Information		40/45
Be as	s complete a mation. Fill original for	and accurate as possib out all of your schedule	es first; then complete t	e are filing together, both are equally responsible the information on this form. If you are filing amend the box at the top of this page.	for supplyin	
rait	J. Sullill	idilze i oui Assets			Varia	
					Your as Value of	ssets of what you own
1.	Schedule A 1a. Copy lin	VB: Property (Official Foliate	orm 106A/B) rom Schedule A/B		\$	0.00
	1b. Copy lir	ne 62, Total personal pro	perty, from Schedule A/B.		\$	14,018.60
	1c. Copy lin	e 63, Total of all property	y on Schedule A/B		\$	14,018.60
Part	2: Summ	arize Your Liabilities				
						abilities t you owe
			laims Secured by Property nn A, Amount of claim, at	/ (Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	9,659.63
			Unsecured Claims (Officia 1 (priority unsecured clain	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	2,917.47
	3b. Copy th	ne total claims from Part	2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F	\$	63,592.63
				Your total liabilities	s \$	76,169.73
5 (_			
Part		arize Your Income and	•			
4.		Your Income (Official Fo combined monthly incom		ə I	\$	2,799.01
5.		Your Expenses (Official monthly expenses from li			\$	3,161.89
Part	4: Answe	er These Questions for	Administrative and Stat	istical Records		
6.	-		er Chapters 7, 11, or 13? on this part of the form. C	heck this box and submit this form to the court with y	our other sch	nedules.
7.	YesWhat kind	of debt do you have?				
				debts are those "incurred by an individual primarily fo	r a personal,	family, or

the court with your other schedules.

page 1 of 2

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Official Form 106Sum

Best Case Bankruptcy

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,054.84

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,917.47
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	41,000.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	43,917.47

Fill in this info		an and this filings			
Fill in this info	rmation to identify your ca	se and this filing:			
Debtor 1	Kellie Smith First Name	Middle Name	Last Name		
Debtor 2	i iist ivaine	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the: N	ORTHERN DISTRICT O	F OHIO		
	• • • =				
Case number					Check if this is an amended filing
					ag
Official E	- was 40CA/D				
	orm 106A/B				
Schedu	le A/B: Prope	rty			12/15
think it fits best.	Be as complete and accurate ore space is needed, attach a s	as possible. If two married	ce. If an asset fits in more than on people are filing together, both a control of the top of any additional pages.	re equally responsible for sup	plying correct
Part 1: Describe	e Each Residence, Building, L	and, or Other Real Estate	You Own or Have an Interest In		
1. Do you own or	have any legal or equitable in	terest in any residence, bu	uilding, land, or similar property?		
■ No. Go to Pa	art 2.				
_	is the property?				
Part 2: Describe	e Your Vehicles				
Yes 3.1 Make:	Dodge	Who has an intere	st in the property? Check one	Do not deduct secured cla	•
Model:	Avenger	Debtor 1 only		Creditors Who Have Clain	
Year:	2013	Debtor 2 only		Current value of the	Current value of the
Approxima Other info	ate mileage: 87,00		ebtor 2 only ne debtors and another	entire property?	portion you own?
	n: 26151 Lakeshore	At least one of the	ie debiors and another		
	pt. 909, Euclid OH 4413		community property	\$4,350.00	\$4,350.00
		(see instructions)			
			al vehicles, other vehicles, and els, snowmobiles, motorcycle a		
.pages you h	nave attached for Part 2. W	rite that number here	ries from Part 2, including an		\$4,350.00
	e Your Personal and Househo have any legal or equitab		following items?	C	urrent value of the
·	, , ,			p	ortion you own? o not deduct secured aims or exemptions.
	goods and furnishings lajor appliances, furniture, lin	nens, china, kitchenware			
Official Form 106	6A/B	Schedu	e A/B: Property		page '

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Best Case Bankruptcy

D	ebtor 1	Kellie Smith	Case number (if I	known)
	Yes.	Describe		
			Small Appliances, Household Goods & Furnishings	\$2,000.00
7.	□ No	les: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; n I phones, cameras, media players, games	nusic collections; electronic devices
			Two t.v.'s, cellphone, computer & tablet	\$2,000.00
8.	Example ■ No		I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stampions, memorabilia, collectibles	o, coin, or baseball card collections;
9.	Example No	lest for sports a les: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; ca	anoes and kayaks; carpentry tools;
10.	■ No		s, shotguns, ammunition, and related equipment	
11.	□ No		lothes, furs, leather coats, designer wear, shoes, accessories	
			Wearing Apparel & Bedding	\$1,500.00
12.	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, g Watches, necklaces, and rings. No single item of jewelry is worth more than \$600.	iems, gold, silver
13.	Exam _l □ No	arm animals ples: Dogs, cats, Describe	birds, horses	
			One (1) Dog and on (1) Cat	\$0.00
14.	■ No	ther personal ar	nd household items you did not already list, including any health aids you did not	list
15			of all of your entries from Part 3, including any entries for pages you have attach number here	ed \$7,000.00

Official Form 106A/B Schedule A/B: Property

page 2

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Best Case Bankruptcy

De	ebtor 1	Kellie Smith			Case number (if known)	
		scribe Your Financ				
Do	you ow	n or have any le	gal or e	quitable interest in any	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No			our wallet, in your home, i	n a safe deposit box, and on hand when you file your petition	
					Cash on hand	\$0.00
					certificates of deposit; shares in credit unions, brokerage hous the same institution, list each.	ses, and other similar
	Yes				Institution name:	
			17.1.	Checking Account	Huntington National Bank	\$500.00
			17.2.	Savings Account	Huntington National Bank	\$300.00
	Examp ■ No			cly traded stocks ent accounts with brokera	ge firms, money market accounts	
19.	joint v		ck and	interests in incorporate	d and unincorporated businesses, including an interest in	an LLC, partnership, and
	■ No □ Yes.	Give specific info		about them	% of ownership:	
20.	Negoti	able instruments i	nclude p	personal checks, cashiers	e and non-negotiable instruments ' checks, promissory notes, and money orders. ' to someone by signing or delivering them.	
		Give specific infor		about them uer name:		
		nent or pension a bles: Interests in IF), thrift savings accounts, or other pension or profit-sharing plar	ns
	Yes.	List each account		tely. of account:	Institution name:	
			401k empl	through current oyer	Vangaurd, not currently drawing	\$1,369.60
	Your s		l deposit	ts you have made so that	you may continue service or use from a company c utilities (electric, gas, water), telecommunications companies,	or others
	Yes.				Institution name or individual:	
			Rent	al Deposit	Coral Management	\$499.00

Official Form 106A/B Schedule A/B: Property page 3

Debtor	1 Kellie Sm	nith	Case number (if known)	
23. Anı ■ N		r for a number of years)		
	es	Issuer name and description.		
	J.S.C. §§ 530(b)(cation IRA, in an account in a qualified ABLE program 1), 529A(b), and 529(b)(1).	, or under a qualified state tuition prog	ram.
	es	Institution name and description. Separately file the reco	ords of any interests.11 U.S.C. § 521(c):	
25. Tru ■ N		r future interests in property (other than anything liste	ed in line 1), and rights or powers exerc	cisable for your benefit
	-	c information about them		
	amples: Internet	s, trademarks, trade secrets, and other intellectual prodomain names, websites, proceeds from royalties and lice		
		c information about them		
Ex. ■ N	amples: Building	es, and other general intangibles permits, exclusive licenses, cooperative association hold c information about them	ings, liquor licenses, professional licenses	3
	·			
Money	or property ow	ed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax	refunds owed t	to you		
■ N		information about the are including to be the control of the		
Шĭ	es. Give specific	information about them, including whether you already fil	ed the returns and the tax years	
		e or lump sum alimony, spousal support, child support, ma	aintenance, divorce settlement, property s	ettlement
	es. Give specific	information		
Ex	amples: Unpaid v benefits	meone owes you wages, disability insurance payments, disability benefits, s ; unpaid loans you made to someone else	sick pay, vacation pay, workers' compens	ation, Social Security
■ N □ Y	lo es. Give specific	c information		
	•	nce policies disability, or life insurance; health savings account (HSA);	credit, homeowner's, or renter's insurance	е
■ Y	es. Name the ins	surance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
		Group term life insurance through current employer. No cash value.	Mother	\$0.00
If y sor ■ N	ou are the benef meone has died.	perty that is due you from someone who has died iciary of a living trust, expect proceeds from a life insurance information	ce policy, or are currently entitled to receiv	ve property because

Official Form 106A/B Schedule A/B: Property page 4

)
to set off claims
\$2,668.60
\$0.00
\$0.00
total \$14,018.60

Official Form 106A/B Schedule A/B: Property page 5

Fill in this information to identify your case:							
Debtor 1	Kellie Smith						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF OHIO				
Case number					☐ Check if this is an amended filing		
					amended ming		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are	you claiming?	Check one only	even if	our spouse is filing	g with y	ou.
----	-----------------------------	---------------	----------------	---------	----------------------	------------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
2013 Dodge Avenger 87,000 miles Location: 26151 Lakeshore Blvd. Apt.	\$4,350.00		\$3,775.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
909, Euclid OH 44132 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	2020.00(1)(2)	
Small Appliances, Household Goods & Furnishings	\$2,000.00		\$2,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2020:00(1)(4)(0)	
Two t.v.'s, cellphone, computer & tablet	\$2,000.00		\$2,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
Wearing Apparel & Bedding Line from Schedule A/B: 11.1	\$1,500.00		\$1,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line from Goriedate 772. TTT			100% of fair market value, up to any applicable statutory limit	202000(: 1)(-)(2)	
Watches, necklaces, and rings. No single item of jewelry is worth more	\$1,500.00		\$1,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	
than \$600. Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	2020.00(7)(4)(0)	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

De	btor 1 Kellie Smith			Case number (if known)			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim Specific laws that allow exe portion you own					
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	Checking Account: Huntington National Bank	\$500.00		75%	Ohio Rev. Code Ann. § 2329.66(A)(13)		
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit			
	Checking Account: Huntington National Bank	\$500.00		\$125.00	Ohio Rev. Code Ann. § 2329.66(A)(3)		
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit			
	Savings Account: Huntington National Bank	\$300.00		\$300.00	Ohio Rev. Code Ann. § 2329.66(A)(3)		
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)		
	401k through current employer: Vangaurd, not currently drawing	\$1,369.60		\$1,369.60	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)		
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	2020:00(: 1)(: 0)(0)		
	401k through current employer: Vangaurd, not currently drawing	\$1,369.60		\$1,369.60	29 U.S.C. § 1056(d)		
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmen	nt.)		
	Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	.215 days before you filed this case	?		
	□ No	ou by the exemption in		,	•		
	— □ Yes						

Fill in this in	formation to identify you	ir case:				
Debtor 1	Kellie Smith					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT OF O	HIO			
Case numbe	r					
(if known)					☐ Check	if this is an
					ameno	ded filing
Official E	orm 106D					
	orm 106D		_			
Schedu	le D: Creditors	Who Have Claims	Secure	d by Property	<u>y </u>	12/15
	y the Additional Page, fill it	If two married people are filing toget out, number the entries, and attach it				
1. Do any cred	itors have claims secured by	y your property?				
☐ No. C	heck this box and submit t	his form to the court with your othe	r schedules. Y	ou have nothing else to	o report on this form.	
Yes. F	Fill in all of the information	below.				
Part 1: Li	st All Secured Claims					
		more then one accured claim list the or	aditor congrataly	, Column A	Column B	Column C
for each claim.	If more than one creditor has	more than one secured claim, list the cr a particular claim, list the other credito cal order according to the creditor's nar	rs in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Chrys	ler Capital	Describe the property that secures	the claim:	value of collateral. \$9,149.63	s4,350.00	If any \$4,799.63
_	Box 961275	2013 Dodge Avenger 87,000 Location: 26151 Lakeshore Apt. 909, Euclid OH 44132 As of the date you file, the claim is apply.	Blvd.			
	Vorth, TX 76161	Contingent				
Number,	Street, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes th	ne debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 or	nlv	An agreement you made (such as	mortgage or sec	cured		
Debtor 2 or	•	car loan)				
Debtor 1 ar	nd Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
At least one	e of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if the community	nis claim relates to a	Other (including a right to offset)	Automobile	e Loan		
Communi	ty debt					
Date debt was	s incurred 2013	Last 4 digits of account nun	nber XXXX			
Furnit		Describe the property that secures	the claim:	\$510.00	\$0.00	\$510.00
Creditor's	Name					
129 O	ser Ave., Suite A	As of the date you file, the claim is apply.	: Check all that			
Haupp	pauge, NY 11788	Contingent				
Number,	Street, City, State & Zip Code	Unliquidated				
Who owes th	ne debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 or		An agreement you made (such as		curod		
Debtor 1 or	•	 An agreement you made (such as car loan) 	mongage or sec	curea		
	nd Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
	e of the debtors and another	☐ Judgment lien from a lawsuit				
_	nis claim relates to a	Other (including a right to offset)	Furniture			
Date debt was	s incurred 2018	Last 4 digits of account nun	nber XXXX			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1	Kellie Smith			Case number (if known)	
	First Name	Middle Neme	Loot Namo		

Add the dollar value of your entries in Column A on this page. Write that number here:	\$9,659.63
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:	\$9,659.63

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Best Case Bankruptcy

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Best Case Bankruptcy

Fill i	n this inform	ation to identify your	case:									
Debt	or 1	Kellie Smith										
Dobt	.01 1	First Name	Middle	Name	Last Nam	е						
Debt		First Name	Middle	Nome	Loot Nom							
(Spous	se if, filing)	First Name	Middle	name	Last Nam	е						
Unite	ed States Ban	kruptcy Court for the:	NORTHER	N DISTRICT OF OF	HIO							
Case	e number											
(if kno	wn)									Check if	this is a	ın
										amende	d filing	
∩ffi	cial Form	106F/F										
		/F: Creditors W	ho Have	linsecured	Claim	e					12/1	5
any ex Sched Sched	kecutory contr lule G: Execut lule D: Credito	accurate as possible. Us acts or unexpired leases ory Contracts and Unexp ors Who Have Claims Sec	that could red ired Leases (Gured by Prope	sult in a claim. Also li Official Form 106G). D erty. If more space is r	ist executo o not incli needed, co	ory contractude any cre opy the Par	ets on Scho editors with t you need	edule A/B: I h partially s d, fill it out,	Property (Office secured claim number the e	cial Form is that are intries in	106A/B) e listed ir the boxe	and on n es on the
		inuation Page to this pag ber (if known).	e. If you nave	no information to rep	ort in a Pa	irt, do not i	file that Pa	art. On the t	op or any add	litional pa	ages, wri	te your
Part	1: List All	of Your PRIORITY Un	secured Cla	nims								
1. C	o any credito	rs have priority unsecure	d claims agai	nst you?								
	☐ No. Go to Pa	art 2.										
	Yes.											
io p F	dentify what typ possible, list the Part 1. If more the	priority unsecured claims e of claim it is. If a claim ha claims in alphabetical orde han one creditor holds a pa tion of each type of claim, s	es both priority er according to rticular claim,	and nonpriority amount the creditor's name. If y list the other creditors in	ts, list that o you have n n Part 3.	claim here a nore than tw	and show b	ooth priority a unsecured cl	and nonpriority aims, fill out th	amounts. e Continu	. As much uation Pag	h as ge of
							Total Ci	aim	Priority amount		Nonprior amount	ity
2.1	City of E			ast 4 digits of accour	nt number	1168	\$	2,917.47	\$2,9	17.47		\$0.00
	585 E. 2	ditor's Name 22nd St. DH 44123-2099	`	When was the debt inc	curred?	2013-20	017		_			
	Number Str	reet City State ZIp Code		As of the date you file,	, the claim	is: Check a	all that app	ly				
	_	the debt? Check one.	ļ	☐ Contingent								
	Debtor 1 or	nly	I	☐ Unliquidated								
	Debtor 2 or	nly	I	☐ Disputed								
	Debtor 1 ar	nd Debtor 2 only	7	Type of PRIORITY uns	secured cla	aim:						
	☐ At least one	e of the debtors and anothe	er l	Domestic support ob	oligations							
	☐ Check if th	nis claim is for a commur	nity debt	Taxes and certain of	ther debts	ou owe the	e governme	ent				
		ubject to offset?	l	Claims for death or p	personal in	jury while yo	ou were int	oxicated				
	No		İ	Other. Specify								
	☐ Yes			Inc	come Ta	X						
Part	2: List All	of Your NONPRIORIT	Y Unsecure	d Claims								
		rs have nonpriority unsec										
_	_ `	e nothing to report in this p		• •	your other	schedules.						
_	Yes.			•								
u th	insecured claim	nonpriority unsecured cla n, list the creditor separately or holds a particular claim, li	/ for each clain	n. For each claim listed,	, identify w	nat type of o	claim it is. I	Do not list cl	aims already ir	ncluded in	Part 1. If	f more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 11

Jebic	r 1 Kellie Smith	Case number (if known)	
l.1	Amazon Nonpriority Creditor's Name	Last 4 digits of account number XXXX	\$600.00
	P.O. Box 15153 Wilmington, DE 19886-5153	When was the debt incurred? 2014-2017	_
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	_
1.2	Arrowhead Advance Nonpriority Creditor's Name	Last 4 digits of account number	\$1,565.00
	P.O. Box 231	When was the debt incurred? 2017	
	Batesland, SD 57716		_
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community debt	<u> </u>	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Online Loan	_
1.3	Ashworth College	Last 4 digits of account number XXXX	\$915.00
	Nonpriority Creditor's Name		40.000
	6625 The Corners Parkway Suite	When was the debt incurred? 2015	_
	500 Norcross, GA 30092		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Fees	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 11

Best Case Bankruptcy

Capital One Bank	Last 4 digits of account number	xxxx	\$889.0
Nonpriority Creditor's Name P.O. Box 6492 Carol Stream, IL 60197-6492	When was the debt incurred?	2016	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	<u> </u>	
Comenity Bank/Express	Last 4 digits of account number	xxxx	\$435.
Nonpriority Creditor's Name P.O. Box 182789	When was the debt incurred?	2014-2016	
Columbus, OH 43218	when was the dept incurred:	2014-2010	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	■ Other Specify Credit Card		
	- Other. Specify	<u>-</u>	
Coral Management Group Nonpriority Creditor's Name	Last 4 digits of account number	1168	Unknov
13219 Shaker Square Cleveland, OH 44120	When was the debt incurred?	2019	
Number Street City State ZIp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Rent		

Schedule E/F: Creditors Who Have Unsecured Claims

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One dit Finat National Asses	1 - 4 4 19 19 - 4 4 1		¢4 074 00
Credit First National Assoc Nonpriority Creditor's Name	Last 4 digits of account number		\$1,371.00
PO Box 81315 Cleveland, OH 44181	When was the debt incurred?	2014-2017	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other. Specify Credit Card	<u> </u>	
Credit One Bank	Last 4 digits of account number	xxxx	\$1,439.00
Nonpriority Creditor's Name P.O. Box 98872	When was the debt incurred?	2013-2017	
Las Vegas, NV 89193-8872	when was the dept incurred?	2013-2017	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	■ Other. Specify Credit Card		
Deegan Management Nonpriority Creditor's Name	Last 4 digits of account number	3262	\$654.40
19710 Euclid Ave #3 Euclid, OH 44117	When was the debt incurred?	2007	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other. Specify Judgment		

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

Kellie Smith		Case number (if known)	
Dept of Ed/Navient	Last 4 digits of account number	xxxx	\$41,000.0
Nonpriority Creditor's Name P.O. Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	2011-2015	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	Student loans		
gept Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other. Specify		
	Student Lo	ans	
Fingerhut	Last 4 digits of account number	xxxx	\$113.0
Nonpriority Creditor's Name P.O. Box 166 Newark, NJ 07101-0166	When was the debt incurred?	2017	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d ala:	
At least one of the debtors and another	Student loans	u Claiiii.	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Catalog		
First Premier Bank	Last 4 digits of account number	XXXX	\$753.0
Nonpriority Creditor's Name 3820 N Louise Ave	When was the debt incurred?	2015-2017	
Sioux Falls, SD 57107 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 11

1 Kellie Smith	C	Case number (if known)				
Kohls	Last 4 digits of account number	xxxx	\$560.0			
Nonpriority Creditor's Name P.O. Box 3115 Milwaukee, WI 53201	When was the debt incurred?	2013-2017				
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply				
■ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:				
☐ Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not				
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts				
Yes	Other. Specify Credit Card					
LVNV Funding LLC	Last 4 digits of account number	2692	\$1,439.20			
Nonpriority Creditor's Name 6205 Pilot Rd., Suite 3 Las Vegas, NV 89119	When was the debt incurred?	2017				
Number Street City State Zlp Code	As of the date you file, the claim is	: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:				
☐ Check if this claim is for a community debt	☐ Student loans					
Is the claim subject to offset?	Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not				
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts				
Yes	Other. Specify Judgment					
Macy's	Last 4 digits of account number	xxxx	\$445.00			
Nonpriority Creditor's Name						
P.O. Box 8218 Mason, OH 45040	When was the debt incurred?	2014-2017				
Number Street City State Zlp Code	As of the date you file, the claim is	: Check all that apply				
Who incurred the debt? Check one.	•					
Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:				
☐ Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not				
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts				
□Yes	■ Other. Specify Credit Card					

Schedule E/F: Creditors Who Have Unsecured Claims

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Kellie Smith	Case number (if known)	
Mercury Card	Last 4 digits of account number XXXX	\$865.0
Nonpriority Creditor's Name 2220 6th St. Brookings, SD 57006	When was the debt incurred? 2014-2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you di report as priority claims	d not
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	
Milestone	Last 4 digits of account number XXXX	\$675.00
Nonpriority Creditor's Name P.O. Box 4499 P.O. P.O. OR 07076	When was the debt incurred? 2015-2017	
Beaverton, OR 97076 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you di report as priority claims	d not
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card	
Nordstrom	Last 4 digits of account number XXXX	\$2,408.00
Nonpriority Creditor's Name P.O. Box 13589	When was the debt incurred? 2015-2017	
Scottsdale, AZ 85267 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you di report as priority claims	d not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Credit Card	

Schedule E/F: Creditors Who Have Unsecured Claims

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Last 4 digits of account number	1168	\$1,600.0
When was the debt incurred?	2019	
As of the date you file, the claim i	s: Check all that apply	
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
<u></u> '	I claim:	
☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
<u></u>	a plans, and other similar debts	
Other. Specify Loan	g plane, and other eliminal debte	
	4040	4040.00
Last 4 digits of account number	<u> </u>	\$610.03
When was the debt incurred?	2018	
As of the date you file, the claim i	s: Check all that apply	
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
Type of NONPRIORITY unsecured	l claim:	
☐ Student loans		
report as priority claims		
Debts to pension or profit-sharing	g plans, and other similar debts	
Other. Specify Civil		
Last 4 digits of account number	1168	\$1,580.00
When was the debt incurred?	2015	
As of the date you file, the claim i	s: Check all that apply	
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
_	l claim:	
Student loans		
Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
Debts to pension or profit-sharin	g plans, and other similar debts	
	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Loan Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Civil Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Other. Specify Civil	When was the debt incurred? As of the date you file, the claim is: Check all that apply

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	^{r 1} Kellie Smith		Case number (if known)	
4.2	Synchrony Bank	Last 4 digits of account number	1168	\$645.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept PO Box 965060 Orlando, FL 32896	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.2	US Bank	Last 4 digits of account number	1168	\$1,500.00
	Nonpriority Creditor's Name P.O. Box 790408 Saint Louis, MO 63179-0408	When was the debt incurred?	2008	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Auto Loan	Deficiency	
4.2	Victoria's Secret	Last 4 digits of account number	xxxx	\$839.00
	Nonpriority Creditor's Name PO Box 659728	When was the debt incurred?	2013-2017	
	San Antonio, TX 78265-9728 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	I	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	r 1 Kellie Smith		С	ase number (if known)	
4.2	Walmart	Last 4 digits of account numbe	er	xxxx	\$692.00
, ,	Nonpriority Creditor's Name P.O. Box 965024	When was the debt incurred?	- -	2013-2017	
	Orlando, FL 32896-5024 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the clair	m is	: Check all that apply	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	ıred	claim:	
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a se report as priority claims	epara	ation agreement or divorce that you did not	
	■ No	Debts to pension or profit-sha	aring	plans, and other similar debts	
	□Yes	Other. Specify Credit Ca	ard		<u>.</u>
Part 3	List Others to Be Notified About a De	ebt That You Already Listed			
. Use t is try have	this page only if you have others to be notified ying to collect from you for a debt you owe to s e more than one creditor for any of the debts th iied for any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt tha omeone else, list the original creditor at you listed in Parts 1 or 2, list the ad	r in F	Parts 1 or 2, then list the collection agency	here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did ye		9	
	ty Recovery Service Sox 4031			Part 1: Creditors with Priority Unsecured Clai	
	ming, PA 18644	Last 4 digits of account number	-	Part 2: Creditors with Nonpriority Unsecured	Claims
Name	and Address	On which entry in Part 1 or Part 2 did yo	ou li	st the original creditor?	
7330	stra Recovery Services West 33rd St. N			Part 1: Creditors with Priority Unsecured Clai Part 2: Creditors with Nonpriority Unsecured	
Suite	: 118 .ita, KS 67205				
VVICII	ma, NO 07203	Last 4 digits of account number			
	and Address c of Missouri	On which entry in Part 1 or Part 2 did you Line 4.17 of (Check one):		st the original creditor? Part 1: Creditors with Priority Unsecured Clai	ms
	S. Broadband Lane	` ,	_	Part 2: Creditors with Nonpriority Unsecured	
Siou	x Falls, SD 57109	Last 4 digits of account number		,	
Name	and Address	On which entry in Part 1 or Part 2 did yo	ou li	st the original creditor?	
Eucli	d Municipal Court			Part 1: Creditors with Priority Unsecured Clai	ms
	E. 222nd St			Part 2: Creditors with Nonpriority Unsecured	Claims
Eucii	id, OH 44123	Last 4 digits of account number		1919	
	and Address	On which entry in Part 1 or Part 2 did yo		•	
	d Municipal Court			Part 1: Creditors with Priority Unsecured Clai	
	E. 222nd St id, OH 44123			Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number		2692	
	and Address	On which entry in Part 1 or Part 2 did y		9	
	d Municipal Court E. 222nd St			Part 1: Creditors with Priority Unsecured Clai	
	id, OH 44123			Part 2: Creditors with Nonpriority Unsecured	Claims
	•	Last 4 digits of account number		3262	
	and Address	On which entry in Part 1 or Part 2 did y		•	
	ory L. Crutcher, Esq.			Part 1: Creditors with Priority Unsecured Clai	
	Box 23200 sville, KY 40223			Part 2: Creditors with Nonpriority Unsecured	Claims
	, 111 10==0	Last 4 digits of account number		2692	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Kellie Smith		Case number (if known)
Name and Address Javitch Block and Rathbone PLL 1100 Superior Avenue 19th Floor Cleveland, OH 44114	On which entry in Part 1 or Part 2 did y Line 4.20 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	1919
Name and Address LVNV Funding 625 Pilot Road Suite 3 Las Vegas, NV 89119	On which entry in Part 1 or Part 2 did y Line 4.8 of (Check one):	rou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Portfolio Recovery 120 Corporate Blvd Norfolk, VA 23502	On which entry in Part 1 or Part 2 did y Line 4.22 of (Check one):	vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address Robert G. Friedman, Esq. 23240 Chagrin Blvd. Suite 180 Cleveland, OH 44122	On which entry in Part 1 or Part 2 did y Line 4.9 of (Check one):	vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Oleveland, Oli 44122	Last 4 digits of account number	3262
Name and Address Weltman Weinberg & Reis P.O. Box 93784 Cleveland, OH 44101-5784	On which entry in Part 1 or Part 2 did y Line 2.1 of (Check one): Last 4 digits of account number	vou list the original creditor? ■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims 7884
Name and Address Weltman, Weinberg & Reis 323 Lakeside Avenue #200 Cleveland, OH 44113	On which entry in Part 1 or Part 2 did y Line 2.1 of (Check one):	vou list the original creditor? ■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	7884

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	2,917.47
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	2,917.47
					Total Claim
Total	6f.	Student loans	6f.	\$	41,000.00
claims rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ ———	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	22,592.63

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 11 of 11

Fill in this infor	mation to identify your	case:			
Debtor 1	Kellie Smith				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO		
Case number					
(if known)					☐ Check if this is ar amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	-

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

rılı ili uli	s information to identify your	Case.			
Debtor 1	Kellie Smith First Name	Middle Name	Last Name		
Debtor 2	i iist ivailie	Wildule Name	Last Name		
(Spouse if, fi	iling) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case nun	mber				☐ Check if this is an amended filing
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
■ No□ Ye		u lived in a community pr	operty state or territor	r y? (Community property	states and territories include
	o. Go to line 3. es. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in lin Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, lir	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, lir ☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	

Fill	in this information to identify yo	ant case.							
	otor 1 Kellie Sr								
	otor 2 ouse, if filing)								
Uni	ted States Bankruptcy Court fo	r the: NORTHERN DISTRIC	CT OF OHIO						
(If kr	se number		-		□ A		ed filing ent showing	postpetition	
	fficial Form 106l				M	IM / DD/ Y	YYY		
	chedule I: Your II								12/15
sup spo atta Par	as complete and accurate as plying correct information. If use. If you are separated and ch a separate sheet to this fo	you are married and not fili your spouse is not filing w rm. On the top of any additi	ng jointly, and your spo ith you, do not include	ouse is liv information	ing with on about	you, inclu your spo	ude inform ouse. If mo	ation about re space is	t your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed			☐ Emplo	•		
	employers.	Occupation	Endoscopy Techn	ician					
	Include part-time, seasonal, c self-employed work.	Employer's name	Steris						
	Occupation may include stude or homemaker, if it applies.	ent Employer's address	5960 Heisley Rd. Mentor, OH 44060						
		How long employed t	here? 2 yrs			_			
Par	t 2: Give Details About	Monthly Income							
	mate monthly income as of the use unless you are separated.	ne date you file this form. If	you have nothing to repo	ort for any I	ine, write	\$0 in the	space. Incl	ude your no	n-filing
	u or your non-filing spouse hav e space, attach a separate she		ombine the information fo	or all emplo	oyers for	that perso	n on the lin	es below. If	you need
					For Dek	otor 1	For Deb non-filin	tor 2 or ng spouse	
2.	List monthly gross wages, deductions). If not paid mont			2. \$	3,	,873.13	\$	N/A	_
3.	Estimate and list monthly o	vertime pay.		3. +\$		0.00	+\$	N/A	-
4.	Calculate gross Income. Ad	dd line 2 + line 3		4. \$	3.87	73 13	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

13. Do you expect an increase or decrease within the year after you file this form?

Official Form 106I

Yes. Explain:

Combined monthly income

Schedule I: Your Income

Fill	in this information to identify your case:				
	otor 1 Kellie Smith		Check	c if this is:	
DCD	Keille Sillitti			An amended filing	
Deb	otor 2			A supplement show	ing postpetition chapter
(Spo	ouse, if filing)		1	3 expenses as of t	he following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DI	STRICT OF OHIO	1	MM / DD / YYYY	
l	se number known)				
Oi	fficial Form 106J		1		
S	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two normation. If more space is needed, attach anotomber (if known). Answer every question.	narried people are filing together, b her sheet to this form. On the top of	oth are equa f any additio	lly responsible for nal pages, write yo	r supplying correct our name and case
Par 1.	rt 1: Describe Your Household Is this a joint case?				
1.	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate hous	sehold?			
	☐ No ☐ Yes. Debtor 2 must file Official Form	106J-2, Expenses for Separate House	ehold of Debto	or 2.	
2.	Do you have dependents? ■ No				
	— 103.	his information for pendent		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes
					□ No
					☐ Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				103
	<u> </u>				
Est exp	tt 2: Estimate Your Ongoing Monthly Experimate your expenses as of your bankruptcy file penses as of a date after the bankruptcy is file plicable date.	ing date unless you are using this f			
Incl	lude expenses paid for with non-cash governn	nent assistance if you know			
the	e value of such assistance and have included it fficial Form 106I.)	on Schedule I: Your Income		Your expe	enses
4.	The rental or home ownership expenses for payments and any rent for the ground or lot.	your residence. Include first mortgag	e 4. \$		687.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insura	nce	4b. \$		0.00
	4c. Home maintenance, repair, and upkeep e		4c. \$		50.00
_	4d. Homeowner's association or condominium		4d. \$		0.00
5.	Additional mortgage payments for your resid	lence, such as home equity loans	5. \$		0.00

Kellie Smit	<u>n</u>	Case num	ber (if known)	
Utilities:				
	eat, natural gas	6a.	\$	174.00
	, garbage collection	6b.	\$	0.00
6c. Telephone, c	ell phone, Internet, satellite, and cable services	6c.	\$	151.00
	y: Cellphone	6d.	\$	224.00
Food and houseke	·	7.	\$	350.00
	dren's education costs	8.	\$	0.00
Clothing, laundry,		9.	\$	100.00
	ducts and services	10.	\$	100.00
Medical and denta		11.		300.00
	clude gas, maintenance, bus or train fare.			300.00
Do not include car	• •	12.	\$	200.00
	ibs, recreation, newspapers, magazines, and books	13.	\$	100.00
Charitable contrib	utions and religious donations	14.	\$	0.00
Insurance.			·	
Do not include insu	rance deducted from your pay or included in lines 4 or 20.			
15a. Life insuranc	e	15a.	\$	0.00
15b. Health insura	nce	15b.	\$	0.00
15c. Vehicle insur	ance	15c.	\$	158.00
15d. Other insurar	nce. Specify:	15d.	·	0.00
	ide taxes deducted from your pay or included in lines 4 or 2		•	2.00
Specify:		16.	\$	0.00
Installment or leas	se payments:		·	
17a. Car payment		17a.	\$	491.22
17b. Car payment	s for Vehicle 2	17b.	\$	0.00
17c. Other. Specif	·v:	17c.	\$	0.00
17d. Other. Specif		17d.	\$	0.00
•	alimony, maintenance, and support that you did not re			0.00
	ur pay on line 5, Schedule I, Your Income (Official Forn		\$	0.00
	ou make to support others who do not live with you.	,	\$	0.00
Specify:		19.		
Other real propert	y expenses not included in lines 4 or 5 of this form or	on Schedule I: Yo	our Income.	
20a. Mortgages or	n other property	20a.	\$	0.00
20b. Real estate to	axes	20b.	\$	0.00
20c. Property, hor	neowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance	, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's	s association or condominium dues	20e.	\$	0.00
Other: Specify:	Pet Supplies	21.	+\$	50.00
Gym Membersh			+\$	26.67
Gyili Mellibersii	ıp		, ,	20.07
Calculate your mo	nthly expenses			
22a. Add lines 4 thr	ough 21.		\$	3,161.89
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form	06J-2	\$	
22c. Add line 22a a	nd 22b. The result is your monthly expenses.		\$	3,161.89
	, , ,			5,.51100
Calculate your mo			_	
	(your combined monthly income) from Schedule I.	23a.		2,799.01
23b. Copy your m	onthly expenses from line 22c above.	23b.	-\$	3,161.89
	r monthly expenses from your monthly income.	00-	•	-362.88
The result is	your monthly net income.	23c.	\$	-302.00
For example, do you e modification to the term	increase or decrease in your expenses within the year expect to finish paying for your car loan within the year or do you exms of your mortgage?			e or decrease because o
■ No.				

Fill in this infor	mation to identify your	caso:			
Debtor 1	Kellie Smith	case.			
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	r of ohio		
Case number					
(if known)				-	k if this is an nded filing
Official Forr	n 106Dec				
	-	n Individua	Debtor's So	chedules	12/15
r two married pe	eople are filing togethe	r, both are equally respo	ensible for supplying co	rrect information.	
				s. Making a false statement, concealir	
	y or property by fraud in 8 U.S.C. §§ 152, 1341, 1		kruptcy case can result	in fines up to \$250,000, or imprisonm	nent for up to 20
years, or both. 1	6 0.5.6. 99 152, 1341, 1	519, and 3571.			
Sig	n Below				
Did you pa	ny or agree to pay some	one who is NOT an atto	rney to help you fill out I	bankruptcy forms?	
■ No					
□ Yes. I	Name of person			Attach Bankruptcy Petition P	Preparer's Notice.
				Declaration, and Signature (
	alty of perjury, I declare true and correct.	that I have read the sun	nmary and schedules file	ed with this declaration and	
_					
X /s/ Kel			X Signature of	f Dobtor 2	
Kellie Signatu	ire of Debtor 1		Signature of	I DEDIOI Z	
Date I	February 25, 2019		Date		
2 4.0	. Ob. dai y 20, 2019				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in this info	ormation to identify you	r case:				
Debtor 1	Kellie Smith					
Debier 1	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT C	DF OHIO			
Case number (if known)					Check if this is an mended filing	
Be as complete information. If	nt of Financial	, attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup y additional pages, write you		
	,	arital Status and Where You	Lived Before			
1. What is yo	our current marital statu	ıs?				
☐ Marrie ■ Not m	ed narried					
2. During the	e last 3 vears. have vou	lived anywhere other than	where vou live now?			
	List all of the places you l	lived in the last 3 years. Do no	ot include where you live nov Debtor 2 Prior Ac		Dates Debtor 2	
		lived there			lived there	
				ity property state or territor ico, Texas, Washington and V		
■ No □ Yes.	Make sure you fill out <i>Sci</i>	hedule H: Your Codebtors (Of	ificial Form 106H).			
Part 2 Exp	lain the Sources of You	ır Income				
Fill in the to	otal amount of income yo	mployment or from operatin ou received from all jobs and a have income that you receive	all businesses, including part		ndar years?	
□ No						
Yes. I	Fill in the details.					
		Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
	1 of current year until iled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$7,446.99	☐ Wages, commissions, bonuses, tips		
		☐ Operating a business		☐ Operating a business		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

7 .	Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners more of their voting	erships of which you	u are a general լ ny managing age	partner; corporations ent, including one for
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	is payment
3.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi No Yes. List all payments to an insider		nents or transfer a	any property on ac	ccount of a deb	t that benefited an
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures	pulu		morado ordano	or o marrie
).	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	□ No■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	Portfolio Recovery vs. Kellie Smith 18CVF01919	Contract	Euclid Municip 555 E. 222nd S Euclid, OH 441	t	■ Pending □ On appeal □ Concluded	
0.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	hed, attached,	seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				
∣1.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or fii	nancial institution	, set off any am	ounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a taken	action was	Amount
2.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an □ No □ Yes		rty in the possess	ion of an assigned	e for the benefi	t of creditors, a

Case number (if known)

Official Form 107

Debtor 1 Kellie Smith

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known)

Debtor 1

Official Form 107

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Kellie Smith

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Debtor 1 Kellie Smith Case number (if known)

 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. ■ No □ Yes. Fill in the details. 						
	Person Who Received Transfer Address	Description and vo		payme	be any property or nts received or debts exchange	Date transfer was made
	Person's relationship to you				J	
 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 					of which you are a	
	Name of trust	Description and v	alue of the prop	erty trans	ferred	Date Transfer was
						made
Par	rt 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit	Boxes, and Sto	rage Units	3	
20.	 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes, Fill in the details. 					
		ast 4 digits of Type of account count number instrument		unt or Date account was closed, sold, moved, or transferred		Last balance before closing or transfer
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any sa cash, or other valuables? ■ No □ Yes. Fill in the details.		y safe dep	osit box or other deposi	tory for securities,		
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe t	he contents	Do you still have it?
22.	Have you stored property in a storage unit or pl	lace other than your	home within 1 y	ear before	e you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?
Par	rt 9: Identify Property You Hold or Control for	Someone Else				
23.			ıde any property	y you borr	owed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe t	he property	Value
Par	rt 10: Give Details About Environmental Informa	ation				
For	the purpose of Part 10, the following definitions	apply:				
0′′′	Environmental law means any federal, state, or	_		• .		_
Offici	cial Form 107 Statement of	of Financial Affairs for I	inaiviauals Filing 1	ror Bankrup	tcy	page 5

Best Case Bankruptcy

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Debtor 1 **Kellie Smith** Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? п Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below

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Official Form 107

page 6

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debto	r 1 Kellie Smith	Case	e number (if known)
with a		g a false statement, concealing property, or ob to \$250,000, or imprisonment for up to 20 year	otaining money or property by fraud in connection rs, or both.
/s/ Ke	ellie Smith		
	e Smith ture of Debtor 1	Signature of Debtor 2	
Date	February 25, 2019	Date	
Did yo ■ No □ Yes	, ,	ement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
Did yo	u pay or agree to pay someone who is	not an attorney to help you fill out bankruptcy	forms?
No			

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this inforn	nation to identify your c	ase:		
Debtor 1	Kellie Smith			
Dahtar 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DIST	TRICT OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	rm 108			
Statemen	nt of Intention	n for Indiv	iduals Filing Under Chapt	er 7
	vidual filing under chap	-	out this form if:	
	claims secured by you			
You must file this	ver is earlier, unless the	hin 30 days after	ot expired. you file your bankruptcy petition or by the date s e time for cause. You must also send copies to tl	
	ople are filing together i d date the form.	n a joint case, bo	th are equally responsible for supplying correct i	information. Both debtors must
	and accurate as possible our name and case num		needed, attach a separate sheet to this form. Or	n the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims		
For any creditorinformation be	•	t 1 of Schedule D	: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
	editor and the property the	at is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's C	hrysler Capital		☐ Surrender the property.	□No
name:			Retain the property and redeem it.	_
Description of	2013 Dodge Avenge	er 87,000	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	miles		Retain the property and [explain]:	
securing debt:	Location: 26151 Lal Blvd. Apt. 909, Eucl		The debtor will retain the collateral and continue to make monthly payments	
	uther Appliance & Fu	rniture	☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it. ☐ Retain the property and enter into a	■ Yes
Description of			Reaffirmation Agreement.	— 100
property securing debt:			Retain the property and [explain]: The debtor will retain the collateral and continue to make monthly payments	
			continue to make monthly payments	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Debto	or 1 Kellie Smith	Case number (if known)
Desci	ribe your unexpired personal property leases	Will the lease be assumed?
	or's name: ription of leased	□ No
Prope	erty:	☐ Yes
	or's name: ription of leased	□ No
Prope		☐ Yes
	or's name:	□ No
Prope	ription of leased erty:	☐ Yes
	or's name:	□ No
Prope	ription of leased erty:	☐ Yes
	or's name: ription of leased	□ No
Prope		☐ Yes
	or's name:	□ No
Descr Prope	ription of leased erty:	☐ Yes
	or's name: ription of leased	□ No
Prope		☐ Yes
Part 3	3: Sign Below	
	r penalty of perjury, I declare that I have indicated my intention about any pro erty that is subject to an unexpired lease.	perty of my estate that secures a debt and any personal
x /	/s/ Kellie Smith X	
	Kellie Smith Signature Signature of Debtor 1	e of Debtor 2
	Date February 25, 2019 Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Fill i	n this information to identify your case:					irected in this form and	I in Form
Deb	tor 1 Kellie Smith			2A-1Sup	ρ:		
Debi	tor 2			☐ 1. Th	ere is no pres	umption of abuse	
Unite	ed States Bankruptcy Court for the: Northern District of	Ohio		ap	plies will be n	o determine if a presur nade under <i>Chapter 7</i> icial Form 122A-2).	
Case (if kno	e number			_	•	•	_
(II KIIC	wij					does not apply now be received apply service but it could apply	
				☐ Che	ck if this is a	n amended filing	
Off	icial Form 122A - 1						
	apter 7 Statement of Your Cur	rent Mor	nthly Inc	ome			12/15
attach case	complete and accurate as possible. If two married people an a separate sheet to this form. Include the line number to who where (if known). If you believe that you are exempted from ying military service, complete and file Statement of Exempted 1: Calculate Your Current Monthly Income	hich the additior n a presumption	nal information a of abuse becau	applies. C ise you d	n the top of a not have prin	ny additional pages, writ narily consumer debts o	te your name and or because of
1.	What is your marital and filing status? Check one on	ly.					
	■ Not married. Fill out Column A, lines 2-11.						
	\square Married and your spouse is filing with you. Fill ou	t both Columns	A and B, lines	2-11.			
	☐ Married and your spouse is NOT filing with you.	ou and your s	spouse are:				
	☐ Living in the same household and are not legal	lly separated.	Fill out both Co	olumns A	and B, lines 2	2-11.	
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading	gally separated	d under nonbar	nkruptcy	aw that applic	es or that you and your	
10 th	Il in the average monthly income that you received from all so of (10A). For example, if you are filing on September 15, the 6-mile 6 months, add the income for all 6 months and divide the total bouses own the same rental property, put the income from that property.	onth period would by 6. Fill in the re	be March 1 thro	ugh Augu de any ind	st 31. If the amo	ount of your monthly incon ore than once. For examp	ne varied during le, if both
				Column Debtor		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and commission	ons (before all	\$	4,054.84	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a spe filled in. Do not include payments you listed on line 3.	Include regular , your depende	contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession,						
			otor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00	Cany have	Φ.	0.00	¢	
	Net monthly income from a business, profession, or farm	n \$	Copy here ->	• \$	0.00	\$	
6.	Net income from rental and other real property	Dob	otor 1				
	One and a second to the state of the state o	\$ 0.00	otor 1				
	Gross receipts (before all deductions)	-\$ 0.00 -\$					
	Ordinary and necessary operating expenses Net monthly income from rental or other real property	·	Copy here ->	· \$	0.00	\$	
1	THE INCIDENT INCOME NOM TEMATOR OF CHIEF TEAT DIODERLY	.,	,	+		T	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 1

Best Case Bankruptcy

0.00

\$

7. Interest, dividends, and royalties

Signature of Debtor 1

Date **February 25, 2019**

Kellie Smith

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Official Form 122A-1

Fill in this information to identify your case:				
Debtor 1 Kellie Smith				
Debtor 2 (Spouse, if filing)				
United States Bankruptcy Court for the: Northern District of Ohio				
Case number(if known)				

Check the appropriate box as directed in lines 40 or 42:

According to the calculations required by this Statement:

1. There is no presumption of abuse.

☐ 2. There is a presumption of abuse.

☐ Check if this is an amended filing

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	t 1: Determine Your Adjusted Income							
1.	Copy your total current monthly income.	Copy line 11 f	rom Officia	l Form 122	A-1 here=>	. \$_		4,054.84
2.	Did you fill out Column B in Part 1 of Form 122A-1?							
	■ No. Fill in \$0 for the total on line 3.							
	☐ Yes. Is your spouse Filing with you?							
	☐ No. Go to line 3.							
	☐ Yes. Fill in \$0 for the total on line 3.							
3.	Adjust your current monthly income by subtracting any household expenses of you or your dependents. Follow		ouse's inco	ome not use	ed to pay for th	е		
	On line 11, Column B of Form 122A–1, was any amount of texpenses of you or your dependents?	the income you r	reported for	your spouse	NOT regularly	used for	the ho	usehold
	■ No. Fill in 0 for the total on line 3.							
	☐ Yes. Fill in the information below:							
	State each purpose for which the income was use	ed	Fill in	the amoun	t you			
	For example, the income is used to pay your spouse's support other than you or your dependents.	s tax debt or to		ibtracting f spouse's in				
			\$					
			\$		-			
			\$		_			
	Total.		\$	0.00				
					Copy total he	re=>	- \$	0.00
						Г		
4.	Adjust your current monthly income. Subtract line 3 from	n line 1.					\$	4,054.84
т.	region your during months. Capitale into a non-						-	

Official Form 122A-2

Chapter 7 Means Test Calculation

page 1

Part 2:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

647.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$
- 7b. Number of people who are under 65 X 1
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 52.00 Copy here=> \$ 52.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 114
- 7e. Number of people who are 65 or older X **0**
- 7f. **Subtotal.** Multiply line 7d by line 7e. \$ ______**0.00 Copy here=>** +\$ _____**0.00**
- 7g. Total. Add line 7c and line 7f \$ 52.00 Copy total here=> \$ 52.00

Debtor 1 Kellie Smith Case number (if known)

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the	IRS, the U.S. Trustee	Program has divided the	IRS Local Standard for housing	for
ا bankruptcy purposes into two	parts:			

- Housing and utilities Insurance and operating expenses
- Housing and utilities Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart.

To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8.	Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill	400.00
	in the dollar amount listed for your county for insurance and operating expenses\$	482.00

9. Housing and utilities - Mortgage or rent expenses:

- 9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of the creditor	Average monthly payment
-NONF-	¢

Total average monthly payment	\$	0.00 Copy	-\$	Repeat this amount on line 33a.
rotal average monthly payment	Ф	o.oo nere=>	-Ф	line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage	_	0.47.00	Сору	0.47.04
or rent expense). If this amount is less than \$0, enter \$0	\$	847.00	here=> \$	847.00

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

- 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.
 - ☐ 0. Go to line 14.
 - 1. Go to line 12.
 - ☐ 2 or more. Go to line 12.
- 12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

Official Form 122A-2 Chapter 7 Means Test Calculation

page 3

ebioi i	Neme Simul		Case Humber (# kir			
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loar more than two vehicles.					
Ve	hicle 1 Describe Vehicle 1: 2013 Dodge Avenger Blvd. Apt. 909, Euclid		n: 26151 Lake	shore		
13a.	Ownership or leasing costs using IRS Local Standard		\$	497.00		
13b.	Average monthly payment for all debts secured by Vehicle Do not include costs for leased vehicles.	1.				
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 months bankruptcy. Then divide by 60.		at			
	Name of each creditor for Vehicle 1	Average monthly payment				
	Chrysler Capital	\$ 155.55				
	Total Average Monthly Payment	\$155.55	Copy here => -\$	155	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$	0, enter \$0.	\$	341.45	Copy net Vehicle 1 expense here => \$	341.45
Ve	hicle 2 Describe Vehicle 2:					
13d.	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	2. Do not include costs for	r			
	Name of each creditor for Vehicle 2	Average monthly payment				
		\$				
	Total Average Monthly Payment	\$	Copy here => -\$	0.00	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this amount is less than \$	0, enter \$0	. \$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Transportation expense allowance regardless of whether you			, fill in the <i>I</i>] Public \$	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in not claim more than the IRS Local Standard for <i>Public Tran</i>	what you believe is the ap				0.00

Official Form 122A-2

Oth	ner Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxes.	\$	697.66
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.	_	
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or		
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.	\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$	248.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.		
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	50.00
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$	3,561.11

3. F c						
	or debts that are secured by an intere ans, and other secured debt, fill in lir	est in property that you own, including hor nes 33a through 33e.	ne mort	gages, vehicle		
	o calculate the total average monthly pa editor in the 60 months after you file for	yment, add all amounts that are contractually bankruptcy. Then divide by 60.	due to	each secured		
	Mortgages on your home:					erage monthly yment
3а.	Copy line 9b here			=>	\$	0.00
	Loans on your first two vehicles:					
3b.	Copy line 13b here			=>	• \$_	155.55
3c.					• \$	0.00
3d.	List other secured debts:					
lame	of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes or insurance?		
				■ No		
	Luther Appliance & Furniture			☐ Yes	\$	3.40
-				□ No	Ť -	
				□ No	œ.	
-		_		_ Lifes	\$_	
				□ No		
				☐ Yes	+\$	
_					Copy total	<u> </u>
3e.	Total average monthly payment. Add li	nes 33a through 33d	\$_	150.05		\$ 158.95
4. A ı	re any debts that you listed in line 33	nes 33a through 33d secured by your primary residence, a veh upport or the support of your dependents	icle,	150.05	total	\$ <u>158.95</u>
4. A ı	re any debts that you listed in line 33	secured by your primary residence, a veh	icle,	150.05	total	\$158.95
4. Aı or	re any debts that you listed in line 33 other property necessary for your sell. No. Go to line 35. I Yes. State any amount that you mus	secured by your primary residence, a veh upport or the support of your dependents' at pay to a creditor, in addition to the payment asion of your property (called the <i>cure amount</i>)	icle,	150.05	total	\$ 158.95
4. Aı or ■	re any debts that you listed in line 33 rother property necessary for your sell. No. Go to line 35. I Yes. State any amount that you mus listed in line 33, to keep posses	secured by your primary residence, a veh upport or the support of your dependents' at pay to a creditor, in addition to the payment asion of your property (called the <i>cure amount</i>)	icle,	150.05	total	\$ 158.95 Monthly cure amount
4. At or	re any debts that you listed in line 33 rother property necessary for your self. No. Go to line 35. Yes. State any amount that you mus listed in line 33, to keep posses Next, divide by 60 and fill in the	secured by your primary residence, a vehupport or the support of your dependents to pay to a creditor, in addition to the payment is sion of your property (called the cure amount information below.	ss.	Total cure amount	total	Monthly cure
4. At or	re any debts that you listed in line 33 rother property necessary for your self. No. Go to line 35. Yes. State any amount that you mus listed in line 33, to keep posses Next, divide by 60 and fill in the	secured by your primary residence, a vehupport or the support of your dependents to pay to a creditor, in addition to the payment is sion of your property (called the cure amount information below.	ss.	Total cure amount	total here=>	Monthly cure
4. At or	re any debts that you listed in line 33 rother property necessary for your self. No. Go to line 35. Yes. State any amount that you mus listed in line 33, to keep posses Next, divide by 60 and fill in the	secured by your primary residence, a vehupport or the support of your dependents to pay to a creditor, in addition to the payment is sion of your property (called the cure amount information below.	ss.	Total cure amount ÷	total here=>	Monthly cure
4. At or	re any debts that you listed in line 33 rother property necessary for your self. No. Go to line 35. Yes. State any amount that you mus listed in line 33, to keep posses Next, divide by 60 and fill in the	secured by your primary residence, a vehupport or the support of your dependents at pay to a creditor, in addition to the payment asion of your property (called the cure amount information below. Identify property that secures the debt	ss.	Total cure amount ÷	total here=>	Monthly cure amount
4. Ar or	re any debts that you listed in line 33 rother property necessary for your set. No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor. NE- Decrease you owe any priority claims such as a content of the creditor.	secured by your primary residence, a vehupport or the support of your dependents to pay to a creditor, in addition to the payment sion of your property (called the cure amount information below. Identify property that secures the debt To so a priority tax, child support, or alimony -	icle, ? ss. f).	Total cure amount	total here=> 60 = \$ Copy total	Monthly cure amount
4. Ai or	re any debts that you listed in line 33 rother property necessary for your set. No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor. NE- Decrease you owe any priority claims such as the past due as of the filing date of your set.	secured by your primary residence, a vehupport or the support of your dependents to pay to a creditor, in addition to the payment sion of your property (called the cure amount information below. Identify property that secures the debt To so a priority tax, child support, or alimony -	icle, ? ss. f).	Total cure amount	total here=> 60 = \$ Copy total	Monthly cure amount
4. Ai or	re any debts that you listed in line 33 rother property necessary for your set. No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor. NE- Decrease you owe any priority claims such as the past due as of the filling date of you like you. No. Go to line 36.	secured by your primary residence, a vehupport or the support of your dependents at pay to a creditor, in addition to the payment asion of your property (called the cure amount information below. Identify property that secures the debt To a a priority tax, child support, or alimony ar bankruptcy case? 11 U.S.C. § 507.	tal \$that	Total cure amount	total here=> 60 = \$ Copy total	Monthly cure amount

r1 Kell	lie Smith		Case	number (if known			
For more	eligible to file a case under Chapter 13? 11 U.S.C. § e information, go online using the link for Bankruptcy Basons for this form. Bankruptcy Basics may also be availab	s <i>ics</i> specified					
■ No.	Go to line 37.						
☐ Yes.	Fill in the following information.						
	Projected monthly plan payment if you were filing under	er Chapter 13	\$				
	Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unit (for all other districts).	listricts in Ala					
	To find a list of district multipliers that includes your district link specified in the separate instructions for this for be available at the bankruptcy clerk's office.				Cor	oy total	
	Average monthly administrative expense if you were fi	ling under Ch	apter 13	\$		e=> \$	
	I of the deductions for debt payment. es 33e through 36.					\$	207.57
tal Deduc	ctions from Income						
. Add all o	of the allowed deductions.						
	ne 24, All of the expenses allowed under IRS se allowances	\$	3,561.11				
Copy lir	ne 32, All of the additional expense deductions	\$	148.29				
Copy lir	ne 37, All of the deductions for debt payment	+\$	207.57	\neg			
	Total deductions	\$	3,916.97	Copy total	here	=> \$	3,916.9
3: De	etermine Whether There is a Presumption of Abuse						
. Calculat	te monthly disposable income for 60 months						
39a. Co	opy line 4, adjusted current monthly income	\$	4,054.84				
39b. Co	opy line 38, <i>Total deductions</i>	-\$	3,916.97				
	onthly disposable income. 11 U.S.C. § 707(b)(2). ubtract line 39b from line 39a	\$	137.87	Copy here=>\$		137.87	
For the	next 60 months (5 years)				x 60		
39d. To	otal. Multiply line 39c by 60	39d.	\$	8,272.20	Copy here=>	\$	8,272.20
. Find out	t whether there is a presumption of abuse. Check the	box that app	lies:		J		
☐ The	line 39d is less than \$7,700*. On the top of page 1 of the	his form, ched	k box 1, There	e is no presu	mption of a	<i>buse.</i> Go to	Part 5.
	line 39d is more than \$12,850*. On the top of page 1 o	f this form, ch	eck box 2, Th	ere is a pres	umption of	abuse. You	may fill out
Part	4 if you claim special circumstances. Go to Part 5.						

Official Form 122A-2

Chapter 7 Means Test Calculation

*Subject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of adjustment.

page 8

41. 41a. **Fill in the amount of your total nonpriority unsecured debt.** If you filled out *A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules* (Official Form 106Sum), you may refer to line 3b on that form.

\$ 68,902.26 x .25

\$ 17,225.57 | Copy here=> \$ 17,225.57

41b. 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(l)

Multiply line 41a by 0.25.....

42. Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt.

Check the box that applies:

- Line 39d is less than line 41b. On the top of page 1 of this form, check box 1, *There is no presumption of abuse.* Go to Part 5.
- ☐ Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, *There is a presumption of abuse.* You may fill out Part 4 if you claim special circumstances. Then go to Part 5.

Part 4: Give Details About Special Circumstances

- 43. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for which there is no reasonable alternative? 11 U.S.C. § 707(b)(2)(B).
 - No. Go to Part 5.
 - ☐ Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25.

You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments.

Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment
	\$
	\$
	\$

Part 5: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Kellie Smith

Kellie Smith

Signature of Debtor 1

Date **February 25, 2019**

MM / DD / YYYY

Kellie Smith	Case number (if known)	

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2018 to 01/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Steris** Year-to-Date Income:

Last Year:

Debtor 1

Starting Year-to-Date Income: \$29,571.99 from check dated 7/31/2018 .

Ending Year-to-Date Income: \$50,097.14 from check dated 12/31/2018 .

This Year:

Current Year-to-Date Income: \$3,803.91 from check dated 1/31/2019 .

Income for six-month period (Current+(Ending-Starting)): \$24,329.06 .

Average Monthly Income: \$4,054.84.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	¢310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

In re	Kellie Smith		Case N).	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	ENSATION OF ATTO	ORNEY FOR I	DEBTOR(S)	
c	rursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 ompensation paid to me within one year before the ferendered on behalf of the debtor(s) in contemplation	filing of the petition in bankrupte	cy, or agreed to be pa	id to me, for services r	
	For legal services, I have agreed to accept		\$	900.00	
	Prior to the filing of this statement I have receive	ed	\$ <u></u>	900.00	
	Balance Due		\$	0.00	
2. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	I have not agreed to share the above-disclosed co	empensation with any other person	on unless they are mo	embers and associates of	of my law firm.
[☐ I have agreed to share the above-disclosed compet copy of the agreement, together with a list of the				law firm. A
5. I	n return for the above-disclosed fee, I have agreed to	o render legal service for all asp	ects of the bankruptc	y case, including:	
b c	 Analysis of the debtor's financial situation, and re Preparation and filing of any petition, schedules, s Representation of the debtor at the meeting of cre [Other provisions as needed] Negotiations with secured creditors t reaffirmation agreements and applica 522(f)(2)(A) for avoidance of liens on 	statement of affairs and plan wh ditors and confirmation hearing, to reduce to market value; eations as needed; preparation	ich may be required; and any adjourned be exemption plannir	earings thereof;	filing of
5. E	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.			nces, relief from sta	y actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of unkruptcy proceeding.	any agreement or arrangement	for payment to me for	r representation of the	debtor(s) in
	ebruary 25, 2019	/s/ Anna Marie			
Da	nte	Anna Marie Wa Signature of Attor			
		Rauser & Asso	ciates		
		614 W. Superio Cleveland, OH			
		•	44113 Fax: 216-263-6202		
		www.ohiolegal	clinic.com		
		Name of law firm			

United States Bankruptcy Court Northern District of Ohio

In re	Kellie Smith		Case No.	
		Debtor(s)	Chapter	7
VERIFICATION OF CREDITOR MATRIX				
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.				
Date:	February 25, 2019	/s/ Kellie Smith		
		Kellie Smith		
		Signature of Debtor		

Ability Recovery Service PO Box 4031 Wyoming, PA 18644

AD Astra Recovery Services 7330 West 33rd St. N Suite 118 Wichita, KS 67205

Amazon P.O. Box 15153 Wilmington, DE 19886-5153

Arrowhead Advance P.O. Box 231 Batesland, SD 57716

Ashworth College 6625 The Corners Parkway Suite 500 Norcross, GA 30092

Bank of Missouri 5109 S. Broadband Lane Sioux Falls, SD 57109

Capital One Bank P.O. Box 6492 Carol Stream, IL 60197-6492

Chrysler Capital P.O. Box 961275 Fort Worth, TX 76161

City of Euclid 585 E. 222nd St. Euclid, OH 44123-2099

Comenity Bank/Express P.O. Box 182789 Columbus, OH 43218

Coral Management Group 13219 Shaker Square Cleveland, OH 44120

Credit First National Assoc PO Box 81315 Cleveland, OH 44181

Credit One Bank P.O. Box 98872 Las Vegas, NV 89193-8872 Deegan Management 19710 Euclid Ave #3 Euclid, OH 44117

Dept of Ed/Navient P.O. Box 9635 Wilkes Barre, PA 18773

Euclid Municipal Court 555 E. 222nd St Euclid, OH 44123

Euclid Municipal Court 555 E. 222nd St Euclid, OH 44123

Euclid Municipal Court 555 E. 222nd St Euclid, OH 44123

Fingerhut P.O. Box 166 Newark, NJ 07101-0166

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

Gregory L. Crutcher, Esq. P.O. Box 23200 Louisville, KY 40223

Javitch Block and Rathbone PLL 1100 Superior Avenue 19th Floor Cleveland, OH 44114

Kohls P.O. Box 3115 Milwaukee, WI 53201

Luther Appliance & Furniture 129 Oser Ave., Suite A Hauppauge, NY 11788

LVNV Funding 625 Pilot Road Suite 3 Las Vegas, NV 89119

LVNV Funding LLC 6205 Pilot Rd., Suite 3 Las Vegas, NV 89119 Macy's P.O. Box 8218 Mason, OH 45040

Mercury Card 2220 6th St. Brookings, SD 57006

Milestone P.O. Box 4499 Beaverton, OR 97076

Nordstrom P.O. Box 13589 Scottsdale, AZ 85267

Opp Loans One Prudential Plaza 130 E. Randolph St. #1650 Chicago, IL 60601

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US Bank P.O. Box 790408 Saint Louis, MO 63179-0408

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